

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000044265

**Entity Name:** LACEFRONT-WIG.COM INC

**Current Principal Place of Business:**

2910 BUFORD DRIVE APT # 1704  
BUFORD DRIVE, GA 30519

**Current Mailing Address:**

2910 BUFORD DRIVE APT #1704  
BUFORD , GA 30519 US

**FEI Number:** 26-2550617

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STRUNK, JULIA W  
10150 BELLE RIVE BLVD.  
2604  
JACKSONVILLE, FL 32256 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name STRUNK, JULIA W  
Address 2910 BUFORD DRIVE APT #1704  
City-State-Zip: BUFORD GA 30519

Title STV  
Name STRUNK, THOMAS M  
Address 2910 BUFORD DRIVE APT # 1704  
City-State-Zip: BUFORD GA 30519

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STRUNK , THOMAS M

S

04/20/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date